DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: WELLINGTON PLACE OF WHITING (0009629)

Address: 1902 POST ROAD, STEVENS POINT, WI 54481

License Status: REGULAR

Licensed/Certified/Registered 09/01/2003

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History

Survey ID: 0095067 End Date: 06/08/2005 Type: STANDARD Purpose: SURVEY/SELF REPORT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009422 Served 06/24/2005

<u>Compliance</u>

Deficiencies Cited Subject Area <u>Verified</u> Corrected

83.14(1)(d) FIRE SAFETY, FIRST AID & CHOKING

Survey ID: 0090780 End Date: 06/16/2003 Type: STANDARD Purpose: SURVEY/SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10005210 Served 09/05/2003

		Compilation	
Deficiencies Cited	Subject Area	<u>Verified</u>	Corrected
83.14(1)(d)	FIRE SAFETY, FIRST AID & CHOKING	06/08/2005	Yes
83.33(3)(a)1	PRACTITIONER'S WRITTEN ORDER FOR MEDS	06/08/2005	Yes
83.35(5)(c)	FROZEN AT 0 DEGREES F. OR BELOW	06/08/2005	Yes
83.42(3)(f)	SLEEPING HOURS EVACUATION DRILL	06/08/2005	Yes
83.43(4)(b)2.d	SHARED ROOM WHERE MINIMUM LINTEL DEPTH	06/08/2005	Yes

Compliance

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 08/11/2003 SOD #10005210 Appealed: No

Sanctions

OTHER SANCTION

FORFEITURE---83.41(1)(d) SOD #10005210

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